PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

		•	or <u>Fax</u> (5	71)-273-2885			> .	
INSTRUCTIONS: This appropriate. All further indicated unless correcte maintenance fee notifica	form should be used to correspondence including ad below or directed off tions.	for transmitting the ISS ing the Patent, advance of the Patent, advance of the Patent I, by the Island I, by the Island I, by the Island I is the Island I isl	OUE FEE and PUBLICAT orders and notification of (a) specifying a new corre	TION FEE (if requirements fees very spondence address	nired). Blocks will be mailed ; and/or (b) i	1 through 5 s d to the current ndicating a sepa	hould be completed wher correspondence address a arate "FEE ADDRESS" fo	
CURRENT CORRESPOND	7590 05/14 SSLER, GOLDST RK AVENUE, N.W	ock 1 for any change of address	AUG 1 4 2007 ha	te: A certificate of (s) Transmittal. The ers. Each additional e its own certificate	mailing can is certificate of al paper, such e of mailing o	only be used for cannot be used for as an assignment r transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, mus	
STERNE, KES 1100 NEW YOR WASHINGTON		EIN & FOX P.L.I	Sta ade train	Cereby certify that the tes Postal Service values of the Mainsmitted to the USP	rtificate of M nis Fee(s) Tra with sufficient 1 Stop ISSUI TO (571) 273	ailing or Trans nsmittal is being t postage for firs E FEE address 3-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
							(Depositor's name)	
						······································	(Signature)	
()					-		(Date)	
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/812,098 TITLE OF INVENTION	03/30/2004 : PRESSURE SENSOR		Boguslaw Gajdeczko		1857.2	2430000	3089	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOT	TAL FEE(S) DUE	DATE DUE	
nonprovisional	ŅΟ	\$1400	\$300	G\$P(15)	2007 CUCIIVI	ENS 17000001 25	10012008/14/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS	7	98/15/2007 CNGUYEN3 60000135 10			
NOORI, MAX H		2855	073-716000	J 01 FC:1501 02 FC:1504 03 FC:8001			1400.00 OP 300.00 OP 3.00 OP	
CFR 1.363). Change of correspond depress form PTO/SB Address form PTO/SB PTO/SB47; Rev 03-0 Number is required. ASSIGNEE NAME AT PLEASE NOTE: Unler recordation as set forth (A) NAME OF ASSIGNEE (A) NAME OF ASSIGNAME OF ASSIG	ess an assignee is identi 1 in 37 CFR 3.11. Comp GNEE	(1) the names of up to or agents OR, alternation (2) the name of a sing registered attorney or 2 registered patent attolisted, no name will be THE PATENT (print or ty data will appear on the port a substitute for filing an	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. E PATENT (print or type) a will appear on the patent. If an assignee is identified below, the document has been filed for substitute for filing an assignment.) RESIDENCE: (CITY and STATE OR COUNTRY)					
ASML Holding N Please check the appropri		categories (will not be p	Veldhoven, The Ne		orporation or c	other private gro	oup entity Government	
4a. The following fee(s) a Issue Fee	re submitted: o small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
a. Applicant claims	us (from status indicated	s. See 37 CFR 1.27.	☐ b. Applicant is no lon	ger claiming SMAI	LL ENTITY s	tatus. See 37 CF	FR 1.27(g)(2).	
nterest as shown by the re	ecords of the United Stat	es Patent and Trademark	d from anyone other than to Office.	he applicant; a regi	stered attorne	y or agent; or the	e assignee or other party in	
Authorized Signature	Matelle	Tolon hel		Date 8	14/07			
	Michelle K. Holor		Registration N		54,179			
This collection of informa in application. Confident submitting the completed his form and/or suggestic Box 1450, Alexandria, Vi	ation is required by 37 Clality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DO 3-1450	FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain or a 1.14. This collection is estable the individual of the	retain a benefit by the timated to take 12 revidual case. Any co er, U.S. Patent and O THIS ADDRESS	he public which minutes to cor mments on the Trademark Of S. SEND TO:	ch is to file (and nplete, including the amount of time ffice, U.S. Depa Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rument of Commerce, P.O. or Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.